As a below named inventor, I/we hereby declare that:

My/our residence, post office address and citizenship are as stated below next to my/our name. I/we believe I am/we are the original, first and sole/joint inventor/s of the subject matter which is claimed and for which a patent is sought on the invention entitled

HETEROARYLOXY-SUBSTITUTED PHENYLAMINOPYRIMIDINES AS RHO-KINASE INHIBITORS

the specification of which is attached hereto,

or was filed on October 16, 2003

as a PCT Application Serial No. PCT/EP2003/011452

I/we hereby state that I/we have reviewed and understand the contents of the above-identified specification, including the claims.

I/we acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56.

I/we hereby claim priority benefits under Title 35, United States Code, §119 and § 119(e)(1) of any foreign and/or U.S. provisional application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

10250113.0	<b>Germany</b>	October 28, 2002
(Number)	(Country)	(Month/Day/Year Filed)
10332232.9 (Number)	<b>Germany</b> (Country)	July 16, 2003 (Month/Day/Year Filed)

I/we hereby claim the benefit under Title 35, United States Code, \$120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, \$112, I/we acknowledge the duty to disclose the material information as defined in Title 37, Code of Federal Regulations, \$1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing Date)	(Status)	
		(patented, pending, abandoned)	
(Application Serial No.)	(Filing Date)	(Status)	
	_	(patented, pending, abandoned)	

I/we hereby declare that all statements made herein of my/our own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

Jeffrey M. Greenman, Reg.No. 26,552 Tilman Breitenstein, Limited Recognition under 37 C.F.R. § 11.9(b) Jerrie L. Chiu, Reg. No. 41,670 William F. Gray, Reg. No. 31,018 Susan M. Pellegrino, Reg. No. 48,972 Barbara A. Shimei, Reg. No. 29,862

Address all written correspondence to Customer No. 35	Direct Telephone Calls To:		
Mr. Jeffrey M. Greenman			
Bayer Pharmaceuticals Corporation	(203)812-3964(Jerri	(203)812-3964(Jerrie L. Chiu)	
400 Morgan Lane			
West Haven, Connecticut 06516			
		L	
FULL NAME OF SOLE OR FIRST INVENTOR	INVENTOR S SIGNATUR	F. C	DATE
Achim Feurer	Hour o	tuns	24.4.05
RESIDENCE	•	CITIZENSHIP	
D-69259 Wilhelmsfeld, Germany		German	
POST OFFICE ADDRESS			
Erlbrunnenweg 5, D-69259 Wilhelmsfeld, G	ermany	7	
FULL NAME OF SECOND INVENTOR	INVENTOR'S SIGNATUR	E	3.06. D
Samir Bennabi	101	man '	3.06.01
RESIDENCE		CITIZENSHIP	
69004 Lyon, France		French	
POST OFFICE ADDRESS			
20 rue Belfort, 69004 Lyon, France	T	· · · · · · · · · · · · · · · · · · ·	
FULL NAME OF THIRD INVENTOR	INVENTOR'S SIGNATUR		DATE
Heike Heckroth	111.11/1	ú/ /	10.3.05
RESIDENCE		CITIZENSHIP	
D-42113 Wuppertal, Germany		German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverk	<del></del>		
FULL NAME OF FOURTH INVENTOR	INVENTOR'S SIGNATUR		DATE
Hartmut Schirok	1 77 . 60.	<del></del>	16.3.20cs
D-42287 Wuppertal, Germany		CITIZENSHIP German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverku	sen, Germany		
FULL NAME OF FIFTH INVENTOR	INVENTOR'S SIGNATUR	E J. M	DATE
Joachim Mittendorf	Jacob	Ju mu	14.2 2005
RESIDENCE	7/00	CITIZETSHIP	
D-42113 Wuppertal, Germany		German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverku			
FULL NAME OF SIXTH INVENTOR	INVENTOR'S SIGNATUR	E / 1	DATE
Raimund Kast	Kanno	1 hars	10.03.05
RESIDENCE		CITIZENSHIP	
D-42349 Wuppertal, Germany		German	•
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverku	sen, Germany	· <b>A</b>	
FULL NAME OF SEVENTH INVENTOR	INVENTOR'S SIGNATUR	¥ (/ (/	DATE
Johannes-Peter Stasch	Shim. 1 N	a say	10.03.05
RESIDENCE		CITIZENSHIP	
D-42651 Solingen, Germany	·	German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverku	sen, Germany		

FULL NAME OF EIGHTH INVENTOR	INVENTOR'S SIGNATURE	-	DATE NU.S.OS
Jean Mark Gnoth	101.100		10.5.05
D-40822 Mettmann-Germany	· /.	CITIZENSHIP German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Lever		4	•
FULL NAME OF NINTH INVENTOR	INVENTOR'S SIGNATURE	1.	DATE
Klaus Münter	hildrig hier	1 <del>-</del>	10-3.05
RESIDENCE		CITIZENSHIP	
D-42489 Wülfrath, Germany		German	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Lever			····
ILL NAME OF TENTH INVENTOR INVENTOR'S SIGNATURE			DATE
Dieter Lang	Niely P	<del></del>	153 3 or
RESIDENCE		C141ZENSHIP	
D-42553 Velbert, Germany		German	
POST OFFICE ADDRESS	:		
c/o Bayer HealthCare AG, D-51368 Leverl			
FULL NAME OF ELEVENTH INVENTOR	INVENTOR'S SIGNATURE		DATE
Santiago Figueroa Perez			01 04 05
RESIDENCE	With	CITIZENSHIP	
D-51373 Leverkusen, Germany		Cuban	
POST OFFICE ADDRESS			
c/o Bayer HealthCare AG, D-51368 Leverl			
FULL NAME OF TWELFTH INVENTOR	INVENTOR SIGNATURE	1.0	27.5.05
Heimo Ehmke	1/2/10	CITIZENSHIP	12,4.3.03
RESIDENCE		German	
D-22301 Hamburg, Germany		German	
POST OFFICE ADDRESS	n.,		
Agnesstraße 38, D-22301 Hamburg, German	INVENTOR'S SIGNATURE		DATE
FULL NAME OF THIRTEENTH INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE	1	CITIZENSHIP	
RESIDENCE		CITIZENSHII	
POST OFFICE ADDRESS			
FOST OTTICE ADDRESS			
FULL NAME OF FOURTHEENTH INVENTOR	INVENTOR'S SIGNATURE		DATE
TODE WIND OF TOOKTHEEMYN THEEMYON			
RESIDENCE		CITIZENSHIP	
POST OFFICE ADDRESS			
, ,			
FULL NAME OF FIFTEENTH INVENTOR	INVENTOR'S SIGNATURE	· · . · · . · · · · · · · · ·	DATE
RESIDENCE		CITIZENSHIP	
,			
POST ÓFFICE ADDRESS			
, ,			
FULL NAME OF SIXTEENTH INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP	
, ,			
POST OFFICE ADDRESS			······································
, ,			
FULL NAME OF SEVENTEENTH INVENTOR	INVENTOR'S SIGNATURE		DATE
RESIDENCE		CITIZENSHIP	<del>-</del>
,			
POST OFFICE ADDRESS			
<b>,</b> ,			